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AUTHOR Loschiavo, James F.
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ABSTRACT

Fifteen recommended steps of an approach useful for identifying and serving the total needs of older Americans within their communities are delineated. Three broad types of need criteria discussed are normative need, felt need, and prior receipt of service need. The approach is illustrated by actual data from a 1976 study in Cleveland, Ohio. Continued research is needed to test out the basic assumptions underlying this approach to needs assessment, with respect to cost-efficient services, existing community services, and the extent to which the measures for determining normative need are good proxies for determining true need. Five attachments are included: indicators of normative need for four services, indicators of felt need and prior service need for four services, definition of 28 services identified in the Cleveland study, the format of the data collection instrument sent to 118 agencies in Cleveland, and six tables of data from the Cleveland study. (Author)

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# "AN APPROACH TO IDENTIFYING AND SERVING THE TOTAL NEEDS OF OLDER AMERICANS IN THE COMMUNITY"

FOR PRESENTATION AT THE
GERONTOLOGICAL SOCIETY ANNUAL
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Prepared by:
James F. Loschiavo
Supervisory Mathematician
U.S. General Accounting Office
Financial and General
Management Studies Division
Washington, D.C. 20548

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--Definitions of Normative and Felt Needs

reported by J. Bradshaw (1972), "A Taxonomy of Social Need" in McLachlan (1972)

--Definitions of Services

technique developed by the Duke University Center on Aging

--Format of Agency Data Collection Instrument

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--Typing

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INTRODUCTION

Since the Fall of 1975 I have been involved with the study of Older Americans. In particular, I have been working extensively with the data base developed for the U.S. General Accounting Office's review of the impact of services on the well-being of older people in Cleveland, Ohio. That data base has been used in two U.S. GAO reports to the Congress with a third report in process. The two issued reports are entitled:

--The Well-Being of Older People in Cleveland, Ohio (HRD-77-70, April 19, 1977) and

--Home Health: The Need for a National Policy to Better Provide for the Elderly (HRD-78-19, Dec. 30, 1977)

In this paper, I will present an approach to identifying and serving the total "needs" of Older Americans in the community.

For the sake of illustrating some of the steps in the approach, I will use actual information from the Cleveland Elderly Data Base. Even though the data presented is primarily for illustration purposes, it is important to note that it accurately reflects the situation that existed for the sampled Older Americans in Cleveland, Ohio, for the summer of 1976.

Throughout the paper, I refer to 3 types of "need" criteria: Normative, Felt, and Prior Service. These terms are defined below:

NORMATIVE NEED--That which the expert or professional, administrator or social scientist defines as need in any given situation. A 'desirable' standard is laid down and compared with the standard that actually exists.[1/]

FELT NEED--Here need is equated with want. When assessing need for a service, the population is asked whether they feel they need it.[1/]

PRIOR RECEIPT OF SERVICE NEED--Here need for service in current time period is equated with receipt of service in previous time period. The assumption is that if a person got it then, he still needs it now. This also assumes he/she needed the service in the first place.

I have selected to use data from 4 of the 28 services identified in the Cleveland Elderly Study. These services are: Social/recreational, Personal Care, Homemaker-Household, and Meal Preparation. They are defined in Attachment III.

1/Attributed to J. Bradshaw (1972), "A Taxonomy of Social Need" in McLachlan (1972).

I chose social/recreational to illustrate the complexity involved in developing a normative need criteria. I chose the other 3 services because they can be provided by both agencies and the family/friend network.

I have selected to use data from 4 different samples of Older Americans from the Cleveland study. These samples are described below:

$N_1$ = A random sample of 1,325 Cleveland Elderly who agreed to interviews in 1975 and 1976 and who were sampled from a Medicare list.

$N_2$ = A subsample of $N_1$ consisting of 887 Cleveland Elderly who were judged by interviewers in 1976 to have given completely reliable answers to all factual and subjective questions.

$N_3$ = A random sample of 194 Cleveland Elderly who agreed to interviews in 1975 and 1976 and who were sampled from a Medicaid list.

$N_4$ = A subsample of $N_3$ consisting of 89 Cleveland Elderly who were judged by interviewers in 1976 to have given completely reliable answers to all factual and subjective questions.

The data used from these samples came from 2 basic sources:

--Older American Resources Survey

Interviews conducted by interviewers from Case Western Reserve University and supported by the Cleveland Foundation, and

--Agency Data Collection Instrument

118 agencies provided data on types and frequency of services provided to each person in the sample.

I would like to first present the approach in general. Then, talk about certain aspects of it.

RECOMMENDED APPROACH

1. Identify and define all services in the community directed toward the Older American. (See Attachment III for illustration.)
2. Select a random sample of Older Americans to be interviewed.
3. For each service, develop the following sets of questions to be asked the sampled Older Americans:
   A. Whether or not the Older American is getting the service.
   B. The source of the service--Agency, Private, family or friend.
   C. Whether or not the service is "needed."
      (1) Normative Need. (OBJECTIVE QUESTIONS)
      (2) Felt Need. (SUBJECTIVE QUESTIONS)
      (3) Prior Service Need. (OPTIONAL)
   D. Whether or not the older person is aware of the service.
4. For each Older American selected to be interviewed, collect demographic information such as Age, Race, Sex, Education, Income, Marital Status, and whether living alone or not.

5. For each service, identify all agencies in the community providing that service to Older Americans.
6. Provide those identified agencies with a list of the Older Americans sampled. Ask them to record the services they are providing to each of those people. This information will be added to the information collected from the interviews of Older Americans. (See Attachment IV for illustration of format.)
7. Pretest the interview document on 20 to 30 Older Americans in the community.
8. Make needed revisions based on the pretest.
9. Hire interviewers--preferably women 30 years of age or older.
10. Train interviewers.
11. Conduct interviews.
12. Computerize data from interviews and agencies.
13. Analyze results.
14. Based on the results of the analyses, the following may be accomplished:
    A. Selecting one "need" criteria for each service. (Not necessarily the same one each time.)
    B. Shortening the interview document to only what is necessary.
    C. Identifying characteristics of Older Americans most associated with multiple needs.
    D. Determining why Older Americans in normative need are not getting the needed services. (Lack of awareness or reluctance to accept.)

15. Make operating decisions such as the following:

A. Each Older American in community is to receive one "needs assessment" per year.

B. Each Older American's file should include a shopping list of all the available services directed to Older People. For each of these listed services, it should state whether or not a need exists for the service and whether or not it is being provided.

C. Each Older Person's file should list for each service, the agencies in the community which provide that service. Once the Older American has been identified to need a service which he/she is not getting, efforts should be made to coordinate with agencies directed to provide the service and to followup to ensure the service is provided or why it wasn't provided.

D. Also, each Older American's file should include the name and phone number of any person who would help them in time of need. This person should be contacted if the Older American refuses to accept a "needed" service.

DEVELOPMENT OF "NORMATIVE" NEED CRITERIA

The most difficult task among the steps of the recommended approach is deciding what questions to use to determine normative need and how to evaluate the responses to those questions. In Attachment I, I have listed the objective questions I used to determine normative need for each of 4 services. The social/recreational service had the most objective questions because I included questions on mental health, emotional distress, worry, and depression as indicators of a need for a social/recreational type service. If an Older Person met any 2 of the first 3 indicators or any one of the remaining indicators, the Older Person was determined to be in "Normative" need of a social/recreational service. You may differ with me on some of the questions I used, and/or because an Older Person can be determined to be in "Normative" need simply by meeting only one of the indicators. However, my purpose here is not to debate over "criteria" but to illustrate how it could be done. The recommended approach is flexible so that each community can determine for itself what is best for the services identified in its locale. Before adopting objective questions, however, I strongly urge that each community first research the existing literature for objective measures that have been used successfully and have been adequately documented.

WHY DO OLDER PERSONS GET SERVICES?

I used the Cleveland data base to see if Older Persons got services simply because they "needed" them. But how do we know if they truly "needed" a service. It is very costly and time consuming to determine true need for most services. Therefore, some practical proxies should be attempted. I tried 3--Normative Need, Felt Need, and Prior Service Need.

Table 1 compares the 3 need criteria on the basis of the percentage of Older Persons determined to have need by the respective criteria who also were receiving the service for each of 4 services and for each of 4 samples.

For the sample of 887 Older Americans and for the social/recreational service:

--32.7% who were in "norm" need got social/recreational service.

--80.9% who were in "felt" need got social/recreational service.

--75.0% who got social/recreational service in 1975 also got it in 1976.

This information suggests that persons who expressed a desire for social/recreational service or had gotten it in 1975 would probably get it in 1976.

For the sample of 887 and for the Personal Care service:

--44.0% who were in "norm" need got personal care.

--96.4% who were in "felt" need got personal care.

--46.4% who got personal care in 1975 also got it in 1976.

This suggests that persons who expressed a desire for personal care service would probably get it.

For the sample of 887 Older Americans and for the meal preparation service:

--86.7% who were in "norm" need got meal preparation service.

--93.6% who were in "felt" need got meal preparation service.

--55.1% who got meal preparation service in 1975 also got it in 1976.

This suggests that persons who express a desire for the service and/or those having objective need would probably get the service.

Based on the data presented for the 4 services, one can conclude that Older Persons get services primarily because they express a desire for them.

(For more details on each of the 4 services and each of the 4 samples, see Table 1 in Attachment V on pp. 1 to 4 .)

IS THERE A PROBLEM WITH USING "FELT" NEED?

Sometimes yes, sometimes no.

Table 2 compares the percentage of Older Persons in Normative" need who would receive needed service in 3 situations for each of 4 services and each of 4 samples. The 3 situations are:

--if "felt" need criteria was used to determine who got service.

--if "prior service" need criteria was used to determine who got service.

--the actual system in operation, who actually got services in 1976.

For the sample of 887 Older Persons:

--only 32.3% of those in "norm" need would have gotten social/recreational service if "felt" need criteria was used to determine receipt of service, and

--only 31.0% of those in "norm" need would have gotten personal care service if "felt" need criteria was used to determine receipt of service.

On the other hand:

--64.7% of those in "norm" need would have gotten homemaker service if "felt" need criteria was used to determine receipt of service, and

--80.0% of those in "norm" need would have gotten meal preparation service if "felt" need criteria was used to determine receipt of service.

Given that the "normative" need criteria comes closer to identifying true need than does the "felt" need criteria, the "felt" need criteria should not be used when its use would fail to provide service to a majority of those in "normative" need.

(For more details on each of 4 services and each of 4 samples, see Table 2 (in Attachment V) on pp. 5 to 8.)

THE "TOTAL PERSON" CONCEPT

So far I have discussed identifying older persons' needs for individual services, but what about the total needs of the Older Person. I feel that it is extremely important to identify and serve the total needs for each Older Person. I like to use the analogy of an automobile. You discover that your car battery is weak and giving you trouble, so you take your car in to have the battery checked. The service station operator checks the battery, finds it to be weak, and replaces it with a new battery. Now you get your car back and everything is okay. But 2 weeks later, your new battery is weak like the previous one. You return it to the service station, and they now go beyond checking the battery to what may have been causing the batteries to lose power. Sure enough the problem is discovered--a defective generator.

I think that Older Persons usually get their "obvious" needs taken care of but the "less obvious or hidden" ones are seldom if ever identified. Without systematic identification of need, it is most probable that some true needs would not be served. "Obvious needs" are those directly related to an Older Person's physical health and/or ability to perform activities for daily living. The "less obvious needs" are those associated with his economic resources, social resources, and mental well-being.

MULTIPLE NEEDS IN THE CLEVELAND STUDY

Using the 4 selected services as my universe of total services directed to the Older Person in Cleveland and for each of the 3 need criteria and each of 4 samples, I compared the distribution of:

--the number of needs in total, (4 would be the maximum)

--the number of unmet needs in total, and (4 would be the maximum)

--the percentage of total needs which were unmet or met.

For the 887 sample:

--41.0 percent had no "normative" need while about 50.5 percent had no "felt" need.

--40.6 percent had only one "normative" need while 39.2 percent had only one "felt" need.

--18.4 percent had 2 to 4 "normative" needs identified while only 10.2 percent had 2 to 4 "felt" needs identified.

This suggests that the use of "felt" need as a primary indicator of true need would understate the total needs for Older Americans. (See Table 3, Attachment V, page 9 for more details.)

Table 4 compares the distribution of "unmet" needs for each "need" criteria and for each sample.

For the sample with 887 Older Persons:

--31.5 percent of those with one or more identified "norm" needs have zero unmet needs, while 81.8 percent of those with one or more identified "felt" needs have zero unmet needs.

--57.9 percent with "norm" needs have only one unmet need, while 16.9 percent with "felt" needs have only one unmet need.

--10.5 percent with "norm" needs have 2 or 3 unmet needs with none having 4 unmet needs, while 1.4 percent with "felt" needs have 2 unmet needs with none having 3 or 4 unmet needs.

This data shows that few Older Persons have one or more unmet needs when the need criteria used is "felt" need. However, assuming that "norm" need criteria is a better measure of the true state of need, it is obvious that a lot of Older Persons having true need will not be identified and therefore not served.

(For further details, see Table 4, Attachment V, page 10 .)

Table 5 compares the distribution of the percent of unmet/met need for each need criteria and for each sample. For the 887 sample of Older Persons:

--31.5% of those with "norm" needs have 100% of them met while 81.8 percent of those with "felt" needs have 100% of them met.

--50.1% of those with "norm" needs have none of them met while only 14.1 % of those with "felt" needs have none of them met.

Again, this data suggests that the total "felt" needs of Older Persons for any one or more of the 4 services studied has been met for a very large percent of the Older Persons sampled. Also that the total "norm" needs of Older Persons for the 4 services is not being met for a substantial portion of the Older Persons sampled.

(For more details, see Table 5, Attachment V, pages 11 to 14 .)

OLDER PERSONS GETTING SERVICE BUT NOT OBJECTIVELY IDENTIFIED TO NEED IT

Tables 1 and 2 show numbers of Older Persons with unmet need and numbers of Older Persons served but not in need for each need criteria and each sample size. I like to refer to this as potential mismatches. If one could determine why those not in need are getting a service, maybe one can redirect those services to those Older Persons with "unmet" need who would accept the service.

Table 6 investigates those Older Persons getting a service but not identified to "objectively" need it for each of 3 services. For each service, the table shows the number of Older Persons getting an unneeded service by the source of that service:

--Family only, agency only, both from family and agency, and unknown.

For the 887 sample of Older Persons:

--48.5% of those getting unneeded personal care service are getting it only from their family or friends.

--71.8% of those getting unneeded homemaker service are getting it only from their family or friends.

--37.4% of those getting unneeded meal preparation are getting it only from their family or friends.

This data suggests that if the family/friend network was aware of the "normative" needs of the Older Persons they are helping, they can redirect their help from areas of no identified need to that of identified need. A redirection of agency resources might be more difficult but certainly possible once a systematic "needs assessment" is in operation.

(For further details, see Table 6, Attachment V, page 15 .)

SUMMARY

I want to emphasize that this approach to "needs assessment" involves some assumptions. They are:

--the identified services for Older Americans in the community are cost/effective services. (They will benefit Older Americans at the lowest reasonable cost.)

--There is no need of the Older Americans which doesn't have a related service in existence in the community.

--The objective measures used for determining "normative" need are good proxies for determining true need.

I feel all of the assumptions above point out a continuing requirement for independent, scientific research and demonstration projects which try to: (1) evaluate the cost/effectiveness of the existing services to the Older American in the community,

(2) identify the need for new services for the Older Persons, and (3) identify better objective measures to use to determine "normative" need for existing services to the Older Person.

Use of the basic approach recommended in this paper without the contributing efforts of independent research in the areas I mentioned above can only be a short-term solution to "Needs Assessment."

| Service | Indicators of Need (Normative) |
|---|---|
| 1. Social Recreational | Any 2 of these 3: |
| | Q. 8 - Know 2 or less people well enough to visit. |
| | Q. 9 - Talk less than 2 times a week to someone. |
| | Q.10 - Spend time with someone less than twice a week. |
| | OR |
| | Q.11 - Have no one to trust and confide in. |
| | OR |
| | Q.12 - Feel lonely quite often. |
| | OR |
| | Q.14 - No one willing to help. |
| | OR |
| | Q.14a - Someone to help now and then only. |
| | OR |
| | Q.31 - Worry very often. |
| | OR |
| | Q.32 - Finds life dull. |
| | OR |
| | Q.33 - Poor satisfaction with life. |
| | OR |
| | Q.34 - 5 or more Capital responses. |
| | OR |
| | Q.87 - Interviewer's rating--Help now or then or not at all. |
| | OR |
| | Q.88 - Interviewer rating--Social relationships unsatisfactory, poor. |
| | Q.94 - Interviewer's rating--<br>Subj: doesn't find life enjoyable or exciting. |
| | OR |
| | Q.95 - Interviewer's Rating of Subject's behavior--Depressed or tearful. |

| Service | Indicators of Need (Normative) |
|---|---|
| 2. Personal Care | Q.56 - unable to use phone.<br>OR<br>Q.61 - unable to take medicine.<br>OR<br>Q.63 - unable to feed oneself.<br>OR<br>Q.64 - unable to dress/undress.<br>OR<br>Q.65 - unable to care for appearance.<br>OR<br>Q.66 - unable to walk.<br>OR<br>Q.67 - unable to get in/out bed.<br>OR<br>Q.68 - unable to take bath or shower. |
| 3. Homemaker-Household | Q.60 - unable to do housework. |
| 4. Meal Preparation | Q.59 - unable to prepare own meals. |

NOTE: All questions listed above were from the OARS Instrument - Duke University Center on Aging.

ATTACHMENT II

| Service | Indication of Felt Need | Indication of Prior Service Need |
|---|---|---|
| Social Recreational | Q.72(2)c. States yes that he/she feels that he/she needs to participate in planned and organized social or recreational programs. | Answers yes to Phase I OARS - Q.72(2) and/or one of 118 agencies queried in 1975 said the person was provided soc/rec service in 1975. |
| Personal Care | Q.72(9)d. States yes that he/she feels he/she needs help with personal care activities. | Answers yes to Phase I OARS - Q.72(9) and/or one of 118 agencies queried in 1975 said the person was provided personal care service in 1975. |
| Homemaker-Household | Q.72(17)d. States yes that person feels he/she needs help with routine housework. | Answers yes to Phase I OARS - Q.72(17) and/or one of 118 agencies said person was provided homemaker service in 1975. |
| Meal Preparation | Q.72(18)c. States yes that person feels that he/she needs someone to regularly prepare his/her meals. | Answers yes to Phase I OARS - Q.72(18) and/or one of 118 agencies said person was provided meal preparation service in 1975. |

NOTE: All felt need questions listed above were from the OARS Instrument - Duke University Center on Aging.

1) TRANSPORTATION
2) ESCORT
3) SOCIAL/RECREATION SERVICES
4) EMPLOYMENT SERVICES
5) SHELTERED EMPLOYMENT SERVICES
6) EDUCATIONAL SERVICES, EMPLOYMENT RELATED
7) EDUCATIONAL SERVICES, NOT EMPLOYMENT RELATED
8) REMEDIAL TRAINING
9) MENTAL HEALTH SERVICES
10) PSYCHOTROPIC DRUGS
11) PERSONAL CARE SERVICES
12) NURSING CARE
13) MEDICAL SERVICES
14) SUPPORTIVE DEVICES AND PROSTHESES
15) PHYSICAL THERAPY
16) CONTINUOUS SUPERVISION
17) CHECKING SERVICES
18) RELOCATION AND PLACEMENT SERVICES
19) HOMEMAKER-HOUSEHOLD SERVICES
20) HOUSING REPAIR AND RENOVATION
21) MEAL PREPARATION
22) FOOD, GROCERIES
23) ADMINISTRATIVE, LEGAL AND PROTECTIVE SERVICES
24) SYSTEMATIC MULTIDIMENSIONAL EVALUATION
25) FINANCIAL ASSISTANCE
26) LIVING QUARTERS
27) COORDINATION, INFORMATION AND REFERRAL SERVICES
28) OUTREACH

1) TRANSPORTATION

Purpose: To provide access (outside of walking distance) to the community, e.g. to service providers, businesses, friends, leisure activities, and special events.

Activity: Transporting an individual from one place to another.

Relevant Personnel: Project staff and/or community volunteer drivers.

Unit of Measure: One-way trips.

Examples: Dial-a-bus

ESCORT

Purpose: To enable an elderly individual's use of public or private transportation (buses, taxis and cars) and/or help them accomplish the purposes of the trips (e.g. grocery shopping and medical appointments).

Activity: Accompanying an individual or group.

Relevant Personnel: Service provider staff or assigned volunteer.

Unit of Measure: One-way trips.

## SOCIAL/RECREATIONAL SERVICES

Purpose: To increase the quality and quantity of an individual's social interactions; to foster skills in making creative use of non-work time including artistic and intellectual development.

Activity: Social interaction, planned and organized activities (either individual or group) to provide creative expression, physical, mental and intellectual development, or community involvement.

Relevant Personnel: Social worker, activity therapist, volunteer coordinator, social club personnel, recreation worker, occupational therapist, educational personnel, crafts teacher.

Unit of Measure: Session

Examples: Social clubs, recreation groups, church groups, hobby groups, special interest groups, volunteer projects, adult education classes, craft courses, speed reading, painting, crafts and hobbies. Friendly visiting and drop-in (client initiated visit to a designated center where the individual is received by staff who express continued interest in client's welfare) are service elements included under social/recreational services.

## EMPLOYMENT SERVICES

Purpose: To provide assistance in finding employment.

Activity: Aiding an individual in finding employment by counseling and/or by referring the job applicant to businesses and agencies seeking employees.

Relevant Personnel: Employment counselor, social worker, guidance counselor, family member.

Unit of Measure: Number of times such assistance was provided.

SHELTERED EMPLOYMENT

Purpose: To provide employment for people who because of physical or mental impairment cannot find a job in the competitive labor market.

Activity: Providing a setting, supervision, materials and/or equipment necessary to allow handicapped or impaired people to work.

Relevant Personnel: Workshop supervisor, rehabilitation counselor, special education personnel.

Unit of Measure: Hours of employment.

Examples: Goodwill Industries, Industries for the Blind.

EDUCATIONAL SERVICES, EMPLOYMENT RELATED

Purpose: To develop or improve occupational skills in order to make the individual more readily employable.

Activity: Formal courses or instruction planned to develop occupational skills either in a preparatory or remedial manner.

Relevant Personnel: Teacher, instructor or training supervisors in educational, business, or industrial settings.

Unit of Measure: Training session hours.

Examples: Shorthand and typing courses in preparation for a secretarial career, professional schools (e.g. dental and law), beautician's college, training courses for older service workers, on the job training, apprenticeship programs.

7) EDUCATIONAL SERVICES, NOT EMPLOYMENT RELATED

Purpose: To increase knowledge or skills for personal enrichment. The purpose of the educational services provided under this category are not to make a person more readily employable.

Activity: Structured and prescheduled courses or instruction.

Relevant Personnel: Professors, instructors and teachers who are experts in their field, acknowledged by training or experience.

Unit of Measure: Training session hours.

8) REMEDIAL TRAINING
(This does not include physical therapy)

Purpose: To improve the capabilities of an individual who is unable to perform some basic personal or instrumental functions because of trauma, illness, deprivation, or other impairment.

Activity: An organized course of instruction or training including the development of personal skills necessary for self-maintenance or for further learning.

Relevant Personnel: Speech therapist, specialized educational personnel, attendant, family member.

Unit of Measure: Sessions.

Examples: Speech therapy, remedial reading or literacy course, reality orientation, training in self-care for the mentally or physically impaired, training for the blind.

9) MENTAL HEALTH SERVICES

Purpose: To identify and evaluate mental impairments which relate to both intra and interpersonal relationships, including individual, marital, familial and environmentally related problems; to provide counseling and/or therapy in order to aid the individual to resolve these problems or to cope with them.

Activity: Mental health evaluation, diagnosis and treatment.

Relevant Personnel: Psychiatrist, social worker, psychologist, nurse; educational, rehabilitation and pastoral counselors.

Unit of Measure: Sessions.

Examples: Psychotherapy (individual or group), counseling, crisis intervention, evaluation of need for psychiatric hospitalization.

10) PSYCHOTROPIC DRUGS

Purpose: To improve the mood and/or psychological function of an individual who is symptomatic, manifesting either anxiety, depression, thought disturbances, or physical symptoms with psychological overlay.

Activity: Evaluation of need for psychotropic drugs; prescribing and/or dispensing of psychotropic drugs.

Relevant Personnel: Any physician.

Unit of Measure: Quantity & Type (Please Attach Listing)

Examples: Valium, Librium, Thorazine, Mellaril, Stelazine, Elavil, Triavil, Tofranil, Miltown, Equanil, Haldol.

11) PERSONAL CARE SERVICES

Purpose: To aid an individual in performing the personal physical activities of daily living.

Activity: Aiding an individual with bathing, dressing, grooming, feeding, and toilet care.

Relevant Personnel: L.P.N., attendant, volunteer, family member.

Unit of Measure: Visit

Example: Home health aide services.

12) NURSING CARE

Purpose: To coordinate, implement and monitor the plan of care prescribed by a health care professional.

Activity: Administration and/or monitoring of prescribed medication or treatment regimens; health counseling; communication with primary clinician and other health team personnel.

Relevant Personnel: R.N., L.P.N., attendant, family member.

Unit of Measure: Visit

Examples: Administration of oral medications, intramuscular or intravenous therapy, catheter care, dressings, taking blood pressure.

13) MEDICAL SERVICES

Purpose: To maintain and/or improve an individual's physical health.

Activity: Medical history taking and performance of physical examinations; evaluation, treatment and monitoring of acute and chronic illnesses.

Relevant Personnel: Physician, physician's assistant, nurse practitioner.

Unit of Measure: Number of visits
DRUGS: Dollars
PROCEDURES: Dollars

Examples: Annual physical health check ups, prescribing medical treatment or regimen, surgical procedures, radiation therapy, special diagnostic procedures, e.g. gastrointestinal series, lumbar puncture.

14) SUPPORTIVE DEVICES AND PROSTHESES

Purpose: To compensate for physical disability that interferes with an individual's independent functioning, or to cosmetically correct physical deformity.

Activity: To supply and/or fit the appropriate device.

Relevant Personnel: Orthopedist, prosthetist, brace fitter, corsetiere (breast prostheses), other personnel involved in the creating and fitting of devices.

Unit of Measure: Dollars

Examples: Walker, wheelchair, leg brace, artificial limb, hearing aid, kidney dialysis machine, facial protheses.

15) PHYSICAL THERAPY

Purpose: To assist an individual in achieving partial or total use of some portion of the body which is not functioning normally.

Activity: A planned set of physical exercises and/or massages and treatments.

Relevant Personnel: Physical therapist, individual (either professional or non-professional) who has been trained to administer and follow a set of prescribed exercises, e.g. attendant, nurse, family member.

Unit of Measure: Sessions.

16) CONTINUOUS SUPERVISION

Purpose: To supervise an individual who cannot be left alone.

Activity: Monitoring an individual's activities to assure his safety and well-being and to be available to readily respond to his immediate needs and emergency situations.

Relevant Personnel: Family member, institutional personnel, paid companion, attendant.

Examples: Constantly supervising a person with severe memory loss and confusion either in his own home or an institution. Day Care for Adults should be included in this category.

Unit of Measure: Day (Count fractional part of day as one day)

17) CHECKING SERVICES

Purpose: To monitor an individual periodically to make sure he has not become ill and unable to get help.

Activity: Establishing regular phone or personal contact (at least 5 times per week) with an individual.

Relevant Personnel: Agency worker, institutional personnel, family member.

Unit of Measure: Contacts (telephone or personal).

Examples: Agency or volunteer program which maintains lists of subscribers who are contacted regularly; family or friends who either live with the individual or who regularly check on him; service provider who sees the individual at least 5 times/week. A specific example is "telephone reassurance". Contacts may be initiated by the elderly person or the service provider.

18) RELOCATION AND PLACEMENT SERVICES

Purpose: To aid an individual locate and secure a new place to live.

Activity: Locating available and suitable places to live and assisting in contracting for a new place to live, including institutional placements.

Relevant Personnel: Social worker, case worker, housing authority personnel, family member.

Unit of Measure: Moves.

Example: Foster Care for Adults.

19) HOMEMAKER-HOUSEHOLD SERVICES

Purpose: To regularly aid in the performance of necessary homemaker and household activities.

Activity: General household work, including cleaning, laundry, shopping for food and clothing and minor home maintenance and repairs. Home chore services should be included in this category. (NOTE: This does not include such things for which one would ordinarily hire a specialist, e.g. plumber, house painter or gardener.)

Relevant Personnel: Homemaker, housekeeper, attendant, family member.

Unit of Measure: Visit

20) HOUSING REPAIR AND RENOVATION

Purpose: To enable elderly persons, through financial assistance and otherwise, to repair and renovate their homes so that their homes will meet minimum housing standards. Also, to adapt existing housing or construction of new housing to meet the needs of elderly persons suffering from physical disabilities.

Activity: Arranging for major electrical, plumbing, carpentry, heating and similar repairs and renovations.

Relevant Personnel: Contractors and/or individuals (union or non-union) having skills needed to perform major housing repairs and renovations.

Unit of Measure: Jobs & Total Cost

21) MEAL PREPARATION

Purpose: To regularly prepare meals for an individual.

Activity: Meal planning, food preparation and cooking.

Relevant Personnel: Cook, homemaker, family member.

Unit of Measure: Meals

Examples: Meals provided under Title VII of Older Americans Act; meals on wheels programs.

22) FOOD, GROCERIES

Purpose: To provide the raw materials for meal preparation.

Materials: Groceries, such as canned goods, produce, meat and dairy products.

Unit of Measure: Dollars

Examples: Groceries purchased by or for an individual for his own use; food provided for an individual by his family, e.g. weekly groceries given to aged person by his adult children; food provided by an institution for one of it's residents, e.g. the food a patient eats while in a hospital.

23) ADMINISTRATIVE, LEGAL AND PROTECTIVE SERVICES

Purpose: To aid and assist an individual in dealing with administrative affairs.

Activity: To act as intermediary, advisor or guardian for the individual in his dealings with agencies, businesses, landlords, etc.; aiding with business affairs, e.g. paying bills.

Relevant Personnel: Lawyer, social worker, guardian, institutional personnel, consumer advocate, family member.

Unit of Measure: Incidents

24) SYSTEMATIC MULTIDIMENSIONAL EVALUATION

Purpose: To systematically evaluate an individual's overall condition.

Activity: The systematic evaluation of an individual's overall functional state including his physical and mental health, his social and economic resources and his capacity for self-care.

Relevant Personnel: A multidisciplinary team or group; individuals specially trained in multidimensional assessment such as a specially trained social worker, nurse, psychiatrist or family practitioner.

Unit of Measure: Number of hours spent in evaluation.

Examples: Evaluation of a person by a multi-service center; complete medical, psychiatric and social workup of a new patient in a group medical practice.

25) FINANCIAL ASSISTANCE

Purpose: To insure an individual has sufficient income to maintain an adequate standard of living.

Classes of Financial Assistance:

a) UNDESIGNATED: Money provided to be used entirely at the discretion of the individual.

-Unit of Measure: Dollars

-Examples: SSI (Supplemental Security Income), Welfare payments, Aid for Dependent Children, financial assistance from family members, financial aid from private organizations or churches, charity.

b) DESIGNATED: Money or subsidies provided for specific uses.

-Unit of Measure: Dollars or dollar equivalent of designated aid.

-Examples: Food stamps, Medicaid, public housing, rent subsidies.

26) LIVING QUARTERS

Purpose: To provide a habitable place to live.

Materials: Room, bed, other furnishings, toilet.

Unit of Measure: Number of nights.

Examples: Room, apartment or other living quarters provided by an individual for his own use; room, etc. provided for an individual by his family, e.g. an aged person living with married daughter and her family in their home; room, etc. provided by an institution for a resident, e.g. room in a rehabilitation center.

27) COORDINATION, INFORMATION AND REFERRAL SERVICES

Purpose: To insure that an individual receives an integrated set of services appropriate to his situation.

Activity: Designing an appropriate service program, providing information about available sources of help, making referrals to other agencies or professionals including aiding with appointments, coordinating, implementing, and monitoring the entire treatment program.

Relevant Personnel: Social worker, health professional, allied health personnel, family member.

Unit of Measure: Number of above activities which occurred on behalf of a client.

28) OUTREACH

Purpose: To contact and inform elderly persons with unmet service needs, particularly the isolated, of programs that coordinate or provide services and to facilitate their appropriate use.

Activity: Canvassing neighborhoods or obtaining names of isolated persons or others likely to need services and contacting them in person or by telephone to describe available services and encourage participation.

Relevant Personnel: Social worker, outreach worker or other staff having a good understanding of the range of community resources available to older persons and sensitive to potential needs of persons.

Unit of Measure: A "yes" or "no" answer is sufficient. "Yes" would indicate that the needs of the individual were identified via an outreach service; "No" would indicate the contrary.

Instructions for Completing Attachment IV

1) This attachment is to be used to estimate the units of service provided to each client on the list. Please use this attachment only if your organization does not maintain records which identify units of service provided to each client and your staff is familiar with the client and can estimate the level of service provided.

2) Identify the service(s) which your organization provide(s) by examining the definitions on Attachment III. Locate on Attachment IV the service or services which you provide and answer the two questions under each service for the clients on our list whom you have served. The letter and number next to the answers to the questions are to be recorded on Attachment II in the appropriate block for each type of service.

EXAMPLE: An organization providing transportation to elderly people would answer the following two questions under "TRANSPORTATION" on page 2 of 8 for each person served on our list:

Approximately how many months during the 6 month period has the client received this service?

Months: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many one-way trips were provided to the client each week during this period?

1) Less than 1 a week

2) One to 3 a week

3) More than 3 a week

If the agency believes it provided services to John Smith during 3 of the 6 months (Answer C) and on an average the client received the service less than once a week (Answer 1), the agency would record C1 in the appropriate block on Attachment II.

1. TRANSPORTATION

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many one-way trips were provided to the client each week during this period?

1) Less than 1 a week
2) One to 3 a week
3) More than 3 a week

2. ESCORT

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many one-way escort trips were provided to the client each week during this period?

1) Less than 1 a week
2) One to 3 a week
3) More than 3 a week

3. SOCIAL/RECREATIONAL SERVICES

Approximately how many months during the 6 month period has the client received these services:

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, during how many sessions per week did the client participate?

1) One a week or less
2) 2-3 a week
3) More than 3 a week

4. EMPLOYMENT SERVICES

About how many times did the client receive employment assistance during the 6 month period?

1) Once during the 6 month period
2) 2-3 times during the 6 month period
3) 4 times or more during the period

5. SHELTERED EMPLOYMENT

During the 6 month period, has the client worked in a sheltered workshop operated by your organization?

1 YES

0 NO

6. EDUCATIONAL SERVICES, EMPLOYMENT RELATED

During the 6 month period, did the client receive any occupational training or on the job training to further prepare him for a job or career?

1 YES

0 NO

7. EDUCATIONAL SERVICES, NOT EMPLOYMENT RELATED

During the 6 month period, did the client take any structured and prescheduled courses or instruction (not employment related)?

1 YES

0 NO

8. REMEDIAL TRAINING

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, about how many training sessions did the client participate in each week during this period?

1) Less than 1 a week
2) One a week
3) More than 1 a week

9. MENTAL HEALTH SERVICES

During the 6 month period, how many sessions did the client have with a doctor, psychologist counselor or other relevant personnel to help him or her cope with problems?

1) Less than 4 sessions
2) 4-12 sessions
3) More than 12 sessions

10. PSYCHOTROPIC DRUGS

(Exact data should be available.)

11. PERSONAL CARE SERVICES

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many times did someone from your organization visit the client to provide personal services during this period?

1) Once a week or less
2) 2-3 times a week
3) More than 3 times a week

12. NURSING CARE

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many visits were made to the client's residence to provide nursing care?

1) One visit or less a week
2) 2-3 times a week
3) More than 3 times a week

13. MEDICAL SERVICES

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many visits to a client's residence per week did someone from your organization make to provide medical services? Include visits made by the client to your organization.

1) Less than once a week
2) Once a week
3) More than once a week

14. SUPPORTIVE DEVISES AND PROSTHESES

(Exact data should be available.)

15. PHYSICAL THERAPY

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many physical therapy sessions did the client have each week during this period?

1) Less than 1 a week
2) One a week
3) More than 1 a week

16. CONTINUOUS SUPERVISION

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many days a week was continuous supervision given to the client during this period?

1) Less than 1 a week
2) One a week
3) More than 1 a week

17. CHECKING SERVICES

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many times per week was the client contacted during this period?

1) Less than once a week
2) One to 3 times a week
3) More than 3 times a week

18. RELOCATION AND PLACEMENT SERVICES

During the 6 month period, how many times did your organization aid the client in locating and securing a place to live?

1) Once
2) 2 or 3 times
3) More than 3 times

19. HOMEMAKER-HOUSEHOLD SERVICES

Approximately how many months during the 6 month period has the client received this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many visits were made to the client's residence to provide homemaker-household services during this period?

1) Less than 1 a week
2) One a week
3) More than one visit a week

20. HOUSING REPAIR AND RENOVATION

During the 6 month period, how many times has your agency assisted the client in arranging or providing financial assistance for major electrical, plumbing, carpentry, heating or similar repairs and renovations?

1) Once
2) 2 or 3 times
3) More than 3 times

21. MEAL PREPARATION

Approximately how many months during the 6 month period did the client receive this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, about how many times a week did the client participate in the meal program?

1) Once a week or less
2) 2-3 times a week
3) 4 times a week or more

22. FOOD, GROCERIES

During the 6 month period how many dollars worth of groceries were provided to the individual?

1) $1 to $10
2) $11 to $50
3) $51 to $100
4) $101 and over

23. ADMINISTRATIVE, LEGAL AND PROTECTIVE SERVICES

During the 6 month period, how many times (unit of measure: incidents) has your agency assisted the client in dealing with administrative affairs:

1) Once
2) 2 or 3 times
3) More than 3 times

24. SYSTEMATIC MULTIDIMENSIONAL EVALUATION

During the 6 month period, has anyone like a doctor or social worker thoroughly reviewed and evaluated the client's overall condition including his physical and mental health and social and financial situation?

1) YES
0) NO

25. FINANCIAL ASSISTANCE

(Exact dollar amount of financial assistance should be available.)

26. LIVING QUARTERS

Approximately how many months during the 6 month period did the client receive this service?

MONTHS: A) 1; B) 2; C) 3; D) 4; E) 5; F) 6

On the average, how many nights per week did your organization provide the individual with living quarters?

1) Less than 1 night a week
2) One to 3 nights a week
3) More than 3 nights a week

27. COORDINATION, INFORMATION AND REFERRAL SERVICES

During the 6 month period did your organization give the individual information about the kind of help that is available or refer the individual to someone who could help?

1) YES

0) NO

28. OUTREACH

During the 6 month period did your organization contact the individual and inform him/her of programs that coordinate or provide services and help the individual obtain the services.

1) YES

0) NO

TABLE 1

Comparison of 3 "Need" Criteria
With Actual System In Operation
For Each of 4 Services

| SOCIAL/RECREATIONAL SERVICE | PERCENT NEED MET | NUMBER OF UNMET NEED 2/ | NUMBER OF SERVED NOT IN NEED 2/ |
|---|---|---|---|
| **Normative Need Criteria** | | | |
| $N_1$ = 1,325 | 27.9% | 544 | 237 |
| $N_2$ = 887 | 32.7% | 301 | 190 |
| $N_3$ = 194 | 27.7% | 94 | 27 |
| $N_4$ = 89 | 32.6% | 31 | 23 |
| **Felt Need Criteria** | | | |
| $N_1$ = 1,306 | 76.7% | 106 | 95 |
| $N_2$ = 882 | 80.9% | 62 | 73 |
| $N_3$ = 194 | 62.8% | 29 | 14 |
| $N_4$ = 87 | 78.0% | 9 | 6 |
| **Prior Service Criteria** | | | |
| $N_1$ = 1,324 | 73.3% | 110 | 144 |
| $N_2$ = 887 | 75.0% | 78 | 102 |
| $N_3$ = 194 | 78.3% | 13 | 16 |
| $N_4$ = 89 | 83.8% | 6 | 7 |

2/ according to the respective criteria used.

TABLE 1 (Cont'd)

| PERSONAL CARE SERVICE | PERCENT NEED MET | NUMBER OF UNMET NEED 2/ | NUMBER OF SERVED NOT IN NEED 2/ |
|---|---|---|---|
| **Normative Need Criteria** | | | |
| $N_1$ = 1,325 | 55.3% | 110 | 59 |
| $N_2$ = 887 | 44.0% | 47 | 33 |
| $N_3$ = 194 | 53.3% | 28 | 11 |
| $N_4$ = 89 | 50.0% | 8 | 3 |
| **Felt Need Criteria** | | | |
| $N_1$ = 1,320 | 98.3% | 2 | 76 |
| $N_2$ = 887 | 96.4% | 1 | 43 |
| $N_3$ = 194 | 90.9% | 3 | 13 |
| $N_4$ = 89 | 83.3% | 1 | 6 |
| **Prior Service Criteria** | | | |
| $N_1$ = 1,324 | 64.2% | 53 | 100 |
| $N_2$ = 886 | 46.4% | 30 | 44 |
| $N_3$ = 194 | 70.0% | 9 | 22 |
| $N_4$ = 89 | 42.9% | 4 | 8 |

2/ according to the respective criteria used.

TABLE 1 (Cont'd)

| HOMEMAKER-HOUSEHOLD SERVICE | PERCENT NEED MET | NUMBER OF UNMET NEED 2/ | NUMBER OF SERVED NOT IN NEED 2/ |
|---|---|---|---|
| **Normative Need Criteria** | | | |
| $N_1$ = 1,322 | 69.1% | 137 | 68 |
| $N_2$ = 886 | 65.8% | 69 | 39 |
| $N_3$ = 194 | 77.6% | 26 | 9 |
| $N_4$ = 89 | 80.5% | 8 | 4 |
| **Felt Need Criteria** | | | |
| $N_1$ = 1,316 | 88.0% | 44 | 53 |
| $N_2$ = 885 | 87.3% | 20 | 34 |
| $N_3$ = 194 | 89.9% | 10 | 10 |
| $N_4$ = 89 | 94.3% | 2 | 4 |
| **Prior Service Criteria** | | | |
| $N_1$ = 1,324 | 68.0% | 108 | 146 |
| $N_2$ = 887 | 63.6% | 56 | 74 |
| $N_3$ = 194 | 76.7% | 20 | 33 |
| $N_4$ = 89 | 75.8% | 8 | 12 |

2/ according to the respective criteria used.

TABLE 1 (Cont'd)

| MEAL PREPARATION SERVICE | PERCENT NEED MET | NUMBER OF UNMET NEED 2/ | NUMBER OF SERVED NOT IN NEED 2/ |
|---|---|---|---|
| **Normative Need Criteria** | | | |
| $N_1$ = 1,322 | 86.4% | 24 | 150 |
| $N_2$ = 885 | 86.7% | 6 | 91 |
| $N_3$ = 194 | 78.3% | 10 | 46 |
| $N_4$ = 89 | 62.5% | 3 | 24 |
| **Felt Need Criteria** | | | |
| $N_1$ = 1,318 | 89.7% | 19 | 139 |
| $N_2$ = 885 | 93.6% | 3 | 87 |
| $N_3$ = 194 | 87.8% | 6 | 39 |
| $N_4$ = 89 | 100.0% | 0 | 20 |
| **Prior Service Criteria** | | | |
| $N_1$ = 1,322 | 63.2% | 98 | 136 |
| $N_2$ = 885 | 55.1% | 53 | 66 |
| $N_3$ = 194 | 75.0% | 19 | 25 |
| $N_4$ = 89 | 72.7% | 6 | 13 |

2/ according to the respective criteria used.

TABLE 2

Comparison of Alternatives
To Using Normative Need
Criteria For Each of 4 Services

| SOCIAL RECREATIONAL | PERCENT OF NORM NEED WHICH WOULD BE MET | NUMBER WITH UNMET NEED 2/ | NUMBER SERVED NOT IN NEED 2/ |
|---|---|---|---|
| **Felt Need Criteria** | | | |
| $N_1$ = 1,306 | 30.2% | 516 | 232 |
| $N_2$ = 882 | 32.3% | 300 | 182 |
| $N_3$ = 190 | 41.4% | 75 | 25 |
| $N_4$ = 87 | 45.7% | 25 | 20 |
| **Prior Service Criteria** | | | |
| $N_1$ = 1,324 | 27.0% | 550 | 209 |
| $N_2$ = 887 | 31.5% | 306 | 171 |
| $N_3$ = 194 | 27.7% | 94 | 24 |
| $N_4$ = 89 | 32.6% | 31 | 22 |
| **Actual System in Operation** | | | |
| $N_1$ = 1,325 | 27.9% | 544 | 237 |
| $N_2$ = 887 | 32.7% | 301 | 190 |
| $N_3$ = 194 | 27.7% | 94 | 27 |
| $N_4$ = 89 | 32.6% | 31 | 23 |

2/ according to respective criteria used.

TABLE 2 (Cont'd)

| PERSONAL CARE SERVICE | PERCENT OF NORM NEED WHICH WOULD BE MET | NUMBER WITH UNMET NEED 2/ | NUMBER SERVED NOT IN NEED 2/ |
|---|---|---|---|
| **Felt Need Criteria** | | | |
| $N_1$ = 1,320 | 47.1% | 128 | 7 |
| $N_2$ = 887 | 31.0% | 58 | 2 |
| $N_3$ = 194 | 48.3% | 31 | 4 |
| $N_4$ = 89 | 31.3% | 11 | 1 |
| **Prior Service Criteria** | | | |
| $N_1$ = 1,324 | 39.0% | 150 | 52 |
| $N_2$ = 886 | 29.8% | 59 | 31 |
| $N_3$ = 194 | 33.3% | 40 | 10 |
| $N_4$ = 89 | 25.0% | 12 | 3 |
| **Actual System in Operation** | | | |
| $N_1$ = 1,325 | 55.3% | 110 | 59 |
| $N_2$ = 887 | 44.0% | 47 | 33 |
| $N_3$ = 194 | 53.3% | 28 | 11 |
| $N_4$ = 89 | 50.0% | 8 | 3 |

2/ according to respective criteria used.

TABLE 2 (Cont'd)

| HOMEMAKER-HOUSEHOLD | PERCENT OF NORM NEED WHICH WOULD BE MET | NUMBER WITH UNMET NEED 2/ | NUMBER SERVED NOT IN NEED 2/ |
|---|---|---|---|
| **Felt Need Criteria** | | | |
| $N_1$ = 1,314 | 72.5% | 120 | 49 |
| $N_2$ = 884 | 64.7% | 71 | 28 |
| $N_3$ = 194 | 79.3% | 24 | 7 |
| $N_4$ = 89 | 80.5% | 8 | 2 |
| **Prior Service Criteria** | | | |
| $N_1$ = 1,321 | 59.7% | 179 | 71 |
| $N_2$ = 886 | 54.5% | 92 | 44 |
| $N_3$ = 194 | 63.8% | 42 | 12 |
| $N_4$ = 89 | 65.9% | 14 | 6 |
| **Actual System in Operation** | | | |
| $N_1$ = 1,322 | 69.1% | 137 | 68 |
| $N_2$ = 886 | 65.8% | 69 | 39 |
| $N_3$ = 194 | 77.6% | 26 | 9 |
| $N_4$ = 89 | 80.5% | 8 | 4 |

2/ according to respective criteria used.

TABLE 2 (Cont'd)

| MEAL PREPARATION SERVICE | PERCENT OF NORM NEED WHICH WOULD BE MET | NUMBER WITH UNMET NEED 2/ | NUMBER SERVED NOT IN NEED 2/ |
|---|---|---|---|
| Felt Need Criteria | | | |
| $N_1$ = 1,316 | 86.4% | 24 | 30 |
| $N_2$ = 883 | 80.0% | 9 | 10 |
| $N_3$ = 194 | 84.8% | 7 | 10 |
| $N_4$ = 89 | 62.5% | 3 | 4 |
| Prior Service Criteria | | | |
| $N_1$ = 1,319 | 60.5% | 70 | 157 |
| $N_2$ = 883 | 55.6% | 20 | 92 |
| $N_3$ = 194 | 73.9% | 12 | 42 |
| $N_4$ = 89 | 37.5% | 5 | 19 |
| Actual System in Operation | | | |
| $N_1$ = 1,322 | 86.4% | 24 | 150 |
| $N_2$ = 885 | 86.7% | 6 | 91 |
| $N_3$ = 194 | 78.3% | 10 | 46 |
| $N_4$ = 89 | 62.5% | 3 | 24 |

2/ according to respective criteria used.

TABLE 3

Distribution of Number of Identified Needs By "Need" Criteria

| Number of Needs | N | Percent of Persons With Needs: Normative Need % | Felt Need % | Prior Service Need % |
|---|---|---|---|---|
| 0 | 1,325 | 32.7 | 44.6 | 46.0 |
| | 887 | 41.0 | 50.5 | 50.1 |
| | 194 | 18.0 | 27.8 | 33.5 |
| | 89 | 31.5 | 33.7 | 36.0 |
| 1 | 1,325 | 37.1 | 36.1 | 31.9 |
| | 887 | 40.6 | 39.2 | 34.8 |
| | 194 | 28.9 | 34.5 | 24.2 |
| | 89 | 34.8 | 40.4 | 31.5 |
| 2 | 1,325 | 13.5 | 10.3 | 12.0 |
| | 887 | 10.7 | 7.4 | 9.6 |
| | 194 | 21.6 | 18.0 | 22.7 |
| | 89 | 16.9 | 18.0 | 20.2 |
| 3 | 1,325 | 8.8 | 7.8 | 8.2 |
| | 887 | 5.0 | 2.5 | 3.9 |
| | 194 | 16.5 | 15.5 | 18.0 |
| | 89 | 11.2 | 5.6 | 10.1 |
| 4 | 1,325 | 8.0 | 1.3 | 1.8 |
| | 887 | 2.7 | 0.3 | 1.6 |
| | 194 | 14.9 | 4.1 | 1.5 |
| | 89 | 5.6 | 2.2 | 2.2 |

TABLE 4

Distribution of Number of Identified Unmet Needs by "Need" Criteria

| Number of Unmet Needs | N | Percent of Persons With Unmet Needs: Normative Need | Felt Need | Prior Service Need |
|---|---|---|---|---|
| | | % | % | % |
| Ø | 1,325 | 27.4 | 79.8 | 59.2 |
| | 887 | 31.5 | 81.8 | 60.5 |
| | 194 | 28.9 | 72.9 | 65.1 |
| | 89 | 34.4 | 79.7 | 66.7 |
| 1 | 1,325 | 56.6 | 17.4 | 31.9 |
| | 887 | 57.9 | 16.9 | 31.6 |
| | 194 | 49.1 | 22.9 | 24.0 |
| | 89 | 50.8 | 20.3 | 24.6 |
| 2 | 1,325 | 13.3 | 2.5 | 7.1 |
| | 887 | 8.6 | 1.4 | 6.3 |
| | 194 | 17.0 | 2.1 | 9.3 |
| | 89 | 13.1 | 0.0 | 8.8 |
| 3 | 1,325 | 2.7 | 0.1 | 1.8 |
| | 887 | 1.9 | 0.0 | 1.6 |
| | 194 | 3.8 | 1.4 | 1.6 |
| | 89 | 1.6 | 0.0 | 0.0 |
| 4 | 1,325 | 0.0 | 0.1 | 0.0 |
| | 887 | 0.0 | 0.0 | 0.0 |
| | 194 | 1.3 | 0.7 | 0.0 |
| | 89 | 0.0 | 0.0 | 0.0 |

TABLE 5

Distribution of Percent of Unmet/Met Need By "Need" Criteria For Each of 4 Samples

| % Unmet Need | Normative Need | Felt Need | Prior Service Need | % Met Need |
|---|---|---|---|---|
| 0% | 27.4% | 79.8% | 59.2% | 100% |
| 25% | 8.2% | 0.7% | 1.3% | 75% |
| 33% | 4.9% | 1.5% | 2.5% | 67% |
| 50% | 11.0% | 4.1% | 7.8% | 50% |
| 67% | 3.9% | 0.8% | 3.2% | 33% |
| 75% | 1.0% | 0.1% | 0.8% | 25% |
| 100% | 43.6% | 12.9% | 25.2% | 0% |
| $N_{1A}$ = | 892 | 734 | 715 | |
| *Not Applicable | 433 | 591 | 610 | |
| $N_1$ | 1,325 | 1,325 | 1,325 | |

*Determined to have no needs: 32.7%, 44.6%, and 46.0% for Normative, Felt, and Prior Criteria, respectively.

TABLE 5

(Cont'd)

| % Unmet Need | Normative Need | Felt Need | Prior Service Need | % Met Need |
|---|---|---|---|---|
| 0% | 31.5% | 81.8% | 60.5% | 100% |
| 25% | 4.0% | 0.5% | 0.7% | 75% |
| 33% | 2.7% | 0.2% | 2.0% | 67% |
| 50% | 9.6% | 3.4% | 7.0% | 50% |
| 67% | 2.1% | 0.0% | 2.3% | 33% |
| 75% | 0.0% | 0.0% | 1.1% | 25% |
| 100% | 50.1% | 14.1% | 26.4% | 0% |
| $N_{2A}$ = | 523 | 439 | 443 | |
| *Not Applicable | 364 | 448 | 444 | |
| $N_2$ = | 887 | 887 | 887 | |

*Determined to have no needs: 41.0%, 50.5%, 50.1% for norm, felt, and prior criteria, respectively.

TABLE 5

(Cont'd)

| % Unmet Need | Normative Need | Felt Need | Prior Service Need | % Met Need |
|---|---|---|---|---|
| 0% | 28.9% | 72.9% | 65.1% | 100% |
| 25% | 8.8% | 3.6% | 0.8% | 75% |
| 33% | 6.3% | 5.0% | 5.4% | 67% |
| 50% | 17.0% | 6.4% | 8.5% | 50% |
| 67% | 5.7% | 1.4% | 4.7% | 33% |
| 75% | 2.5% | 0.0% | 0.0% | 25% |
| 100% | 30.8% | 10.7% | 15.5% | 0% |
| $N_{3A}$ = | 159 | 140 | 129 | |
| *Not Applicable | 35 | 54 | 65 | |
| $N_3$ | 194 | 194 | 194 | |

*Determined to have no needs: 18.0%, 27.8%, 33.5% for norm, felt, and prior criteria, respectively.

TABLE 5

(Cont'd)

| % Unmet Need | Normative Need | Felt Need | Prior Service Need | % Met Need |
|---|---|---|---|---|
| 0% | 34.4* | 79.7% | 66.7% | 100% |
| 25% | 4.9% | 3.4% | 1.8% | 75% |
| 33% | 4.9% | 1.7% | 5.3% | 67% |
| 50% | 13.1% | 8.5% | 10.5% | 50% |
| 67% | 9.8% | 0.0% | 3.5% | 33% |
| 75% | 1.6% | 0.0% | 0.0% | 25% |
| 100% | 31.1% | 6.8% | 12.3% | 0% |
| $N_{4A}$ = | 61 | 59 | 57 | |
| *Not Applicable | 28 | 30 | 32 | |
| $N_4$ = | 89 | 89 | 89 | |

*Determined to have no needs: 31.5%, 33.7%, 36.0% for norm, felt, and prior criteria, respectively.

TABLE 6

Analysis of Served Not In Need

| Service | N | Got Service But Determined Not To Have Norm. Need | Source of Service Received | | | |
|---|---|---|---|---|---|---|
| | | | Family Only # | Agency Only # | Family and Agency # | Unknown # |
| Personal Care | 1,325 | 59 | 32 | 17 | 8 | 2 |
| Homemaker | 1,325 | 68 | 46 | 21 | 1 | 0 |
| Meal Prep | 1,325 | 150 | 65 | 77 | 7 | 1 |
| Personal Care | 887 | 33 | 16 | 9 | 6 | 2 |
| Homemaker | 887 | 39 | 28 | 11 | 0 | 0 |
| Meal Prep | 887 | 91 | 34 | 51 | 5 | 1 |
| Personal Care | 194 | 11 | 8 | 1 | 2 | 0 |
| Homemaker | 194 | 9 | 5 | 4 | 0 | 0 |
| Meal Prep | 194 | 46 | 16 | 25 | 5 | 0 |
| Personal Care | 89 | 3 | 3 | 0 | 0 | 0 |
| Homemaker | 89 | 4 | 2 | 2 | 0 | 0 |
| Meal Prep | 89 | 24 | 7 | 14 | 3 | 0 |